

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN



Permit #:	22-0208
Date:	
Amount Paid:	\$ 225 8/23/22 MLS Prin
Other:	
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Original Application MUST be submitted

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED		<input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER											
Owner's Name:		Cory & Leah Holsclaw				Mailing Address:				PO Box 622				City/State/Zip:		Iron River, WI 54847		Telephone:							
Address of Property:		XXX North Gravel Pit Rd				City/State/Zip:				Iron River, WI 54847								Cell Phone:		(218) 428-5123					
Email: (print clearly)																									
Contractor:		Self				Contractor Phone:				(218) 428-5123				Plumber:				None				Plumber Phone:			
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Mike Fortak				Agent Phone:				(715) 817-2034				Agent Mailing Address (include City/State/Zip):				6173 Iron Lake Rd WI 54847				Written Authorization Required (for Agent)			
PROJECT LOCATION		Legal Description: (Use Tax Statement)				Tax ID#				38717				Recorded Document: (Showing Ownership)				2021R 582802							
SW 1/4, SE 1/4		Gov't Lot		Lot(s)		CSM		Vol & Page		CSM Doc #		Lot(s) #		Block #		Subdivision:									
Tying Sap Hwy																									
Section 17		Township 47		N, Range 8		W		Town of:		Iron River				Lot Size		Acreage		30.55							

<input checked="" type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain?	If yes--continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage	If yes--continue →	Distance Structure is from Shoreline : 145 feet		
<input type="checkbox"/> Non-Shoreland					

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$ 49,000	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input checked="" type="checkbox"/> Slab	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input checked="" type="checkbox"/> None
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> Use	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	
	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> Compost Toilet		
					<input checked="" type="checkbox"/> None	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 36	Width: 36	Height: 17

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage	
<input checked="" type="checkbox"/> Residential Use	<input checked="" type="checkbox"/>	Principal Structure (first structure on property)	garage	( 36 x 36 )	1,286
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)		( X )	
		with Loft		( X )	
		with a Porch		( X )	
		with (2nd) Porch		( X )	
		with a Deck		( X )	
		with (2nd) Deck		( X )	
		with Attached Garage		( X )	
		Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)		( X )	
		Mobile Home (manufactured date) _____		( X )	
<input type="checkbox"/> Commercial Use		Addition/Alteration (explain) _____	( X )		
<input type="checkbox"/> Municipal Use		Accessory Building (explain) _____	( X )		
		Accessory Building Addition/Alteration (explain) _____	( X )		
		Special Use: (explain) _____	( X )		
		Conditional Use: (explain) _____	( X )		
		Other: (explain) _____	( X )		

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Mike Fortak (See Note below)  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: P.O. Box 622, Iron River, WI 54847

Cory & Leah Holsclaw

Date

Date 7-19-2022

Attach  
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Turn Over



In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

- (1) Show Location of:

(2) Show / Indicate:

(3) Show Location of (\*):

(4) Show:

(5) Show:

(6) Show any (\*):

(7) Show any (\*):
- Proposed Construction

North (N) on Plot Plan

(\*) Driveway and (\*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

(\*) Wetlands; or (\*) Slopes over 20%

Fill Out in Ink – NO PENCIL

See attachment

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements
Co Hwy N				
Setback from the Centerline of Platted Road	150	Feet	Setback from the Lake (ordinary high-water mark)	145 Feet
Setback from the Established Right-of-Way	120	Feet	Setback from the River, Stream, Creek	NA Feet
			Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	155	Feet		
Setback from the South Lot Line	1020	Feet	Setback from Wetland	120+ Feet
Setback from the West Lot Line	1025	Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line ROW Co N	120	Feet	Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	NA	Feet	Setback to Well	NA Feet
Setback to Drain Field	NA	Feet		
Setback to Privy (Portable, Composting)	NA	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
The local Town, Village, City, State or Federal agencies may also require permits.

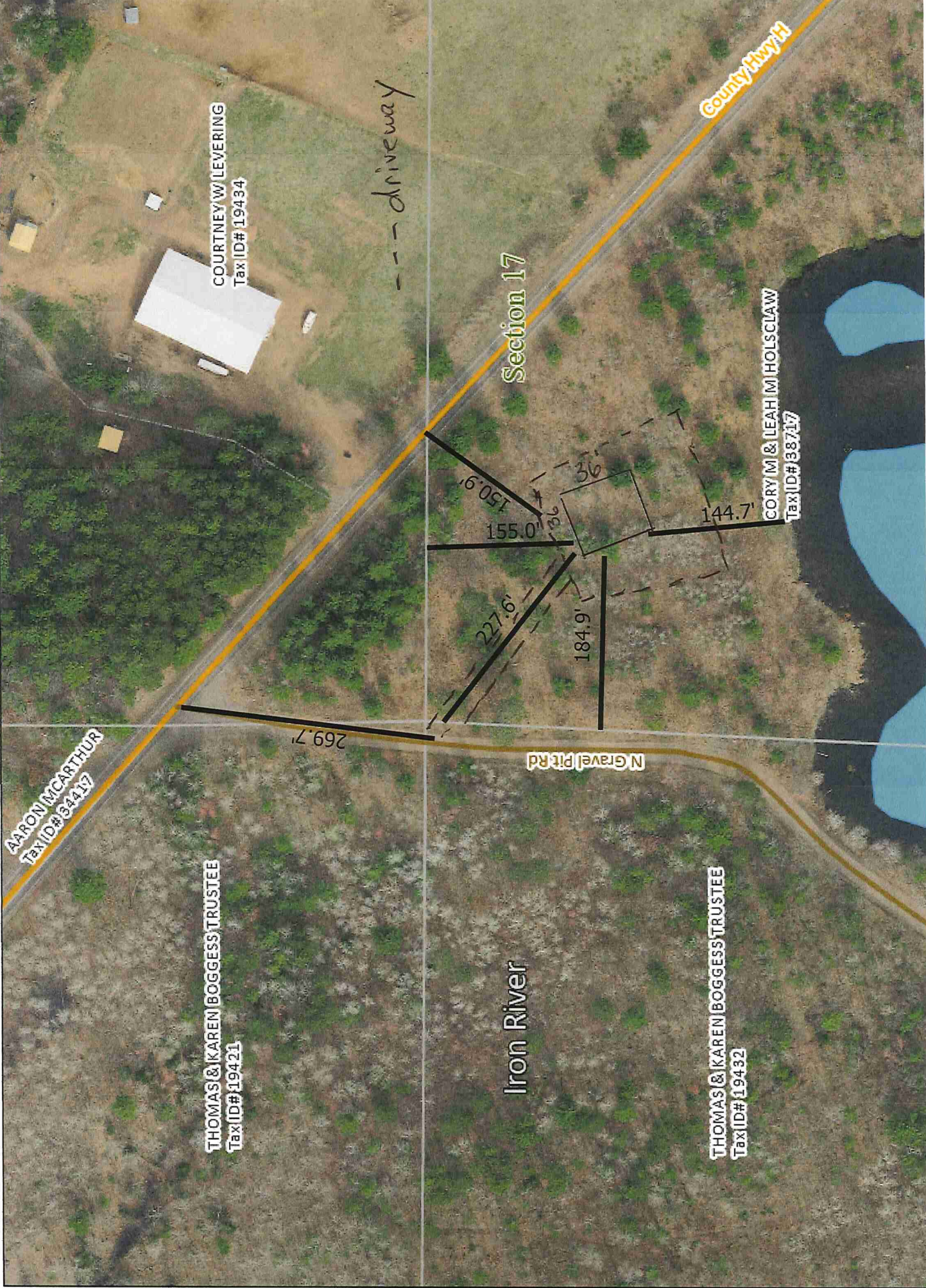
If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number: _____		# of bedrooms: _____		Sanitary Date: _____	
Permit Denied (Date):		Reason for Denial:					
Permit #:		Permit Date:					
Is Parcel a Sub-Standard Lot		<input type="checkbox"/> Yes (Deed of Record) _____ <input checked="" type="checkbox"/> No		Mitigation Required		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is Parcel in Common Ownership		<input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) _____ <input checked="" type="checkbox"/> No		Mitigation Attached		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is Structure Non-Conforming		<input type="checkbox"/> Yes _____ <input checked="" type="checkbox"/> No		Affidavit Required		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Affidavit Attached		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Affidavit Attached		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		Case #:		Case #:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No _____		Were Property Lines Represented by Owner		<input type="checkbox"/> Yes _____ <input checked="" type="checkbox"/> No	
Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No _____		Was Property Surveyed		<input type="checkbox"/> Yes _____ <input checked="" type="checkbox"/> No	
Inspection Record: Site staked. No concerns.						Zoning District (A-1)	
						Lakes Classification (—)	
Date of Inspection: 8/12/22		Inspected by: MS		Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No – (If No they need to be attached.)							
To meet all setbacks including eaves and overhangs. Not for human habitation. For personal storage only. Town/stake/PNR permits may be required							
Signature of Inspector: Ma Sle						Date of Approval: 8/15/2022	
Hold For Sanitary: <input type="checkbox"/> _____		Hold For TBA: <input type="checkbox"/> _____		Hold For Affidavit: <input type="checkbox"/> _____		Hold For Fees: <input type="checkbox"/> _____	



Bayfield County, WI









Bayfield County, WI









**Bayfield County**  
**Impervious Surface Calculations**

These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-1-32(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

Property Owner(s): <i>Cory &amp; Leah Holsclaw</i>			
Mailing Address: <i>PO Box 622</i>		Property Address <i>XXX North Gravel Pit Rd</i>	
Legal Description: <i>SW 1/4, SE 1/4, lying S of Hwy</i>		Section, Township, Range Sec <i>17</i> Township <i>47</i> N, Range <i>8</i> W	
Authorized Agent/Contractor <i>Mike Furtak / self</i>		Gov't Lot	Lot #
			CSM# <i>Doc # 592802</i>
Lot(s) #	Block(s) #	Subdivision	Town of: <i>Iron River</i>
Parcel ID # (PIN #) <i>04-024-2-47-08-17-4 03-000-12000</i>		Tax ID # <i>38717</i>	Date: <i>7-19-2022</i>

**Impervious Surface:** An area that releases as runoff all or a majority of the precipitation that falls on it. "Impervious surface" excludes frozen soil but includes rooftops, sidewalks, driveways, parking lots and streets unless specifically designed, constructed and maintained to be pervious.

**Calculation of Impervious Surface:** Percentage of impervious surface shall be calculated by dividing the surface area of existing and proposed impervious surfaces on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark by the total surface area of the lot or parcel, multiplied by 100.

**Impervious Surface Standard:** Allow up to 15% impervious surface but not more than 30% impervious surface on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark. A permit can be issued for development that exceeds 15% impervious surface but not more than 30% impervious surfaces with a mitigation plan that meets the requirements of the Bayfield County Ordinance(s).

**Existing Impervious Surfaces:** For existing impervious surfaces that were lawfully placed when constructed but that do not comply with the standards in Section(s) 13-1-32(g) and Section 13-1-40(h), the property owner may do any of the following:

- a. Maintenance and repair of all impervious surfaces:
- b. Replacement of existing impervious surfaces with similar surfaces within the existing building footprint;
- c. Relocation or modification of existing impervious surfaces with similar or different impervious surfaces, provided that the relocation or modification does not result in an increase in the percentage that existed on the effective date of the county shoreland ordinance, and meets the applicable setback requirements in Section 13-1-32.



Impervious Surface Item	Dimension	Area (Square Footage)
Existing House		
Existing Accessory Building/Garage		
Existing Sidewalk(s), Patio(s) & Deck(s)		
Existing Covered Porch(es), Driveway & Other Structures		
Proposed Addition/House		
Proposed Accessory Building/Garage (2' eaves) 36' x 36'	40' x 40'	1,600
Proposed Sidewalk(s) & Patio(s)		
Proposed Covered Porch(es) & Deck(s)		
Proposed Driveway	230' x 20' 4,600 $\nabla$ 400' x 20' 8,000 $\nabla$	12,600
Proposed Other Structures		
<b>Total:</b>		14,200

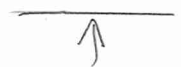
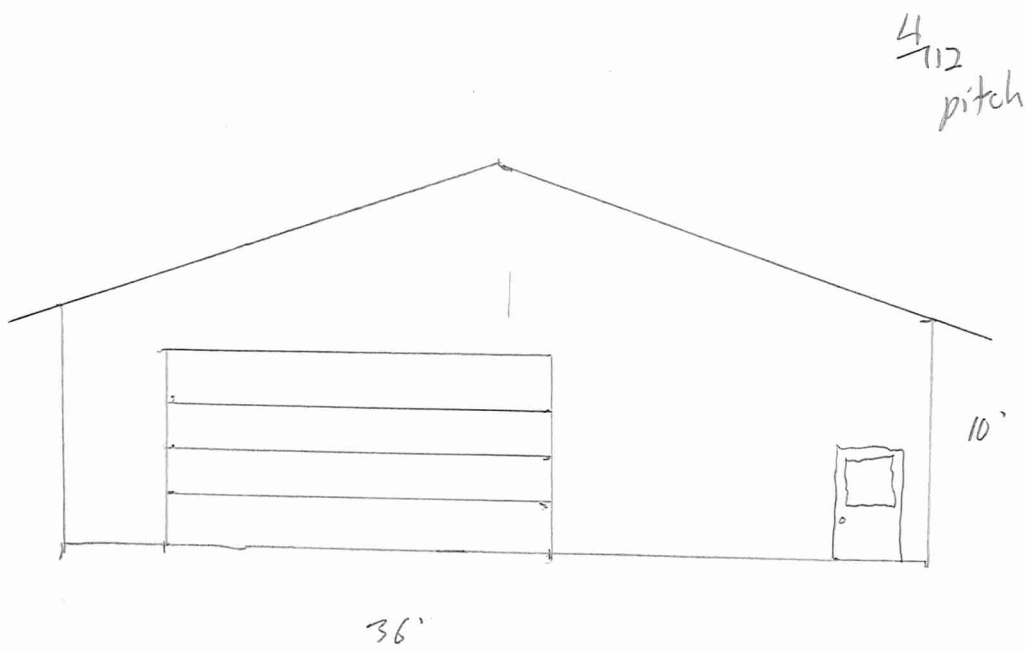
- a. Total square footage of lot: 30.55 ac (43,560) = 1,330,758
- b. Total impervious surface area: 14,200  $\nabla$
- c. Percentage of impervious surface area: 100 x (b)/a = 1.06 %

If the proposed impervious surface area is greater than 15% mitigation is required.

Total square footage of additional impervious surface allowed: @ 15% 195,413.7 @ 30% 385,026.7

Issuance Information (County Use Only)	Date of Inspection:
Inspection Record:	Zoning District ( A-1 ) Lakes Classification ( )
Condition(s):	Stormwater Management Plan Required: <input type="checkbox"/> Yes <input type="checkbox"/> No
Signature of Inspector:	Date of Approval:

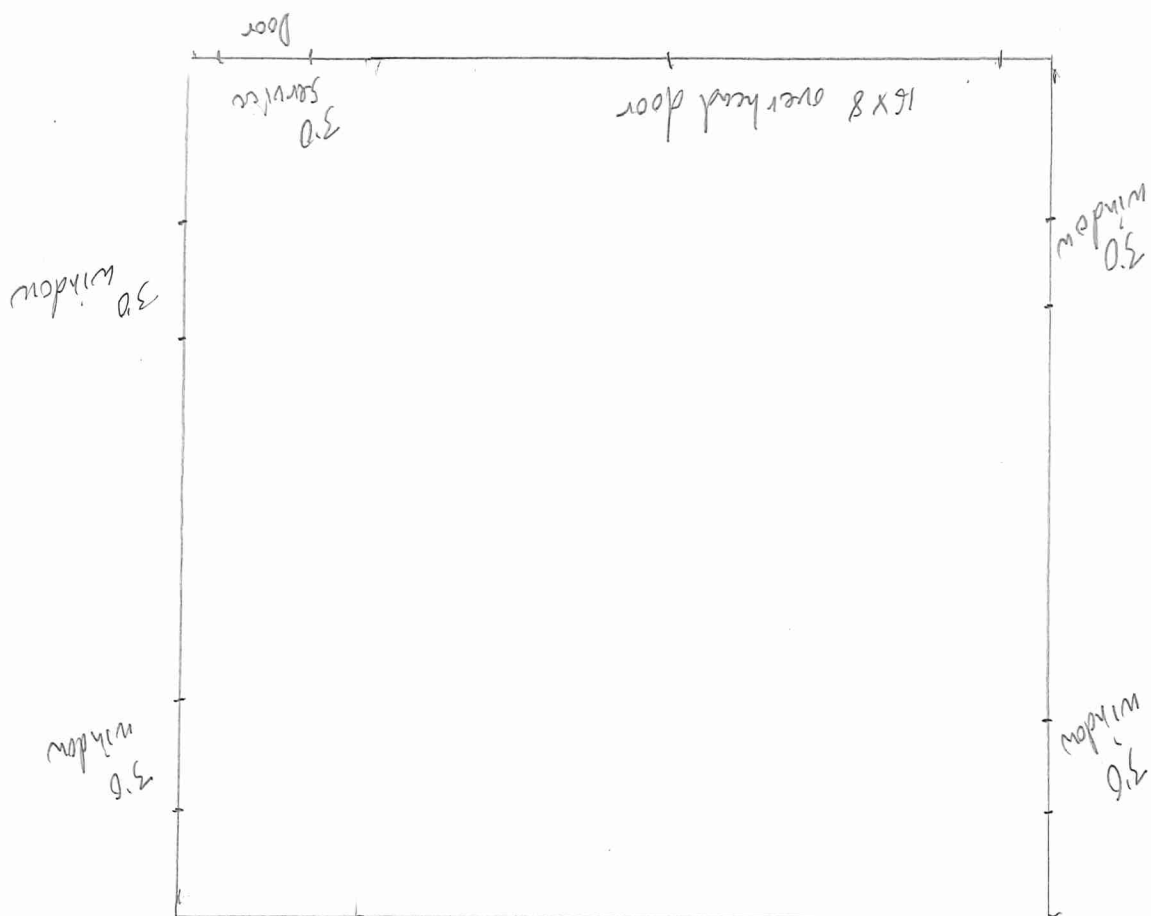




17' to peak



36'

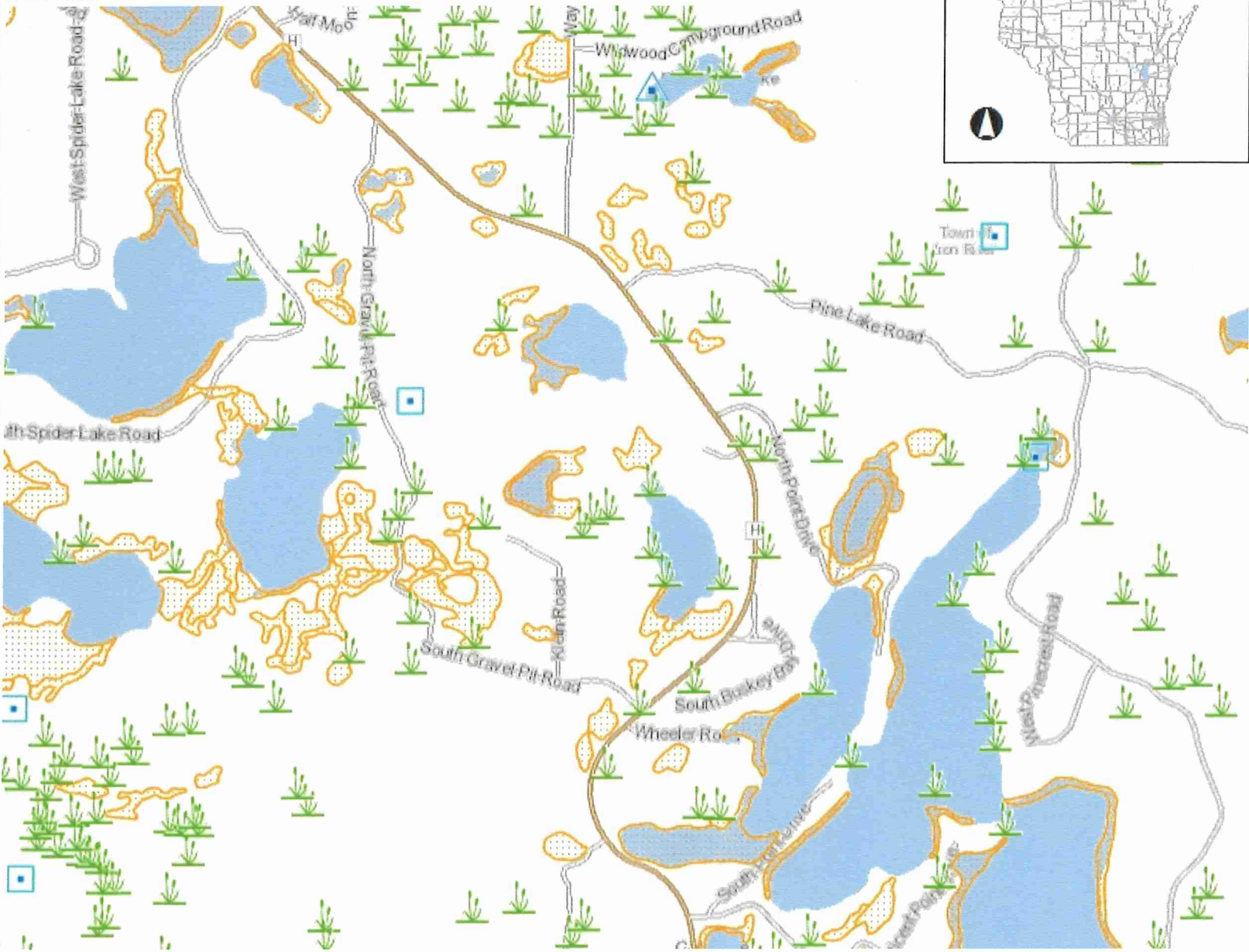


36'





# Surface Water Data Viewer Map



- Legend**
- Wetland Class Areas
  - Wetland Class Points
    - Dammed pond
    - Excavated pond
    - Filled/draind wetland
    - Wetland too small to delineate
    - Filled excavated pond
  - Filled Points
  - Wetland Class Areas
  - Filled Areas
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  - Wetland Class Points
    - Dammed pond
    - Excavated pond
    - Filled/draind wetland
    - Wetland too small to delineate
    - Filled excavated pond
  - Filled Points
  - Wetland Class Areas
  - Filled Areas
  - Wetland Identifications and Confirmations
  - Municipality
  - State Boundaries
  - County Boundaries
  - Major Roads
    - Interstate Highway
    - State Highway
    - US Highway
  - County and Local Roads
    - County HWY
    - Local Road
  - Railroads
  - Tribal Lands
  - Rivers and Streams

0.8 0 0.38 0.8 Miles

NAD\_1983\_HARN\_Wisconsin\_TM

1: 23,760

DISCLAIMER: The information shown on these maps has been obtained from various sources, and are of varying age, reliability and resolution. These maps are not intended to be used for navigation, nor are these maps an authoritative source of information about legal land ownership or public access. No warranty, expressed or implied, is made regarding accuracy, applicability for a particular use, completeness, or legality of the information depicted on this map. For more information, see the DNR Legal Notices web page: <http://dnr.wi.gov/legal/>


## Notes



### Zoning Consulting/Real Estate Services LLC Disclosure

1. I (we) acknowledge that North Star Realtors and John Podlesny, (John Podlesny owner of North Star Realtors), have no interest in Zoning Consulting/Real Estate Services LLC as Zoning Consulting/Real Estate Services LLC and Mike Furtak, owner of Zoning Consulting/Real Estate Services LLC are completely independent of North Star Realtors for this zoning application transaction.
2. Mike Furtak is a licensed Realtor in Wisconsin working as a sales associate for North Star Realtors.
3. I (we) grant permission to Mike Furtak and all vendors whose services are required to obtain the desired zoning permits access to the subject property/properties.
4. I (we) authorize Mike Furtak of Zoning Consulting/Real Estate Services LLC to act as our agent to represent our interests during the application process to obtain the required zoning permit(s).
5. I (we) acknowledge that we are responsible for all costs of services provided by vendors and/or other entities to obtain the required permit(s).
6. I (we) hereby understand that by contracting Mike Furtak and Zoning Consulting/Real Estate Services LLC there is **NO GUARANTEE** the desired permit(s) will be approved by the issuing authorities. Additionally there is no guarantee to the timeframe for the issuance of permits.
7. It is the responsibility of the property owner/contractor/plumber to obtain a Uniform Dwelling Code (UDC) or sanitary permit if required.
8. Mike Furtak and Zoning Consulting /Real Estate Services LLC are only responsible to attempt to gain issuance of the necessary Land Use permit as agreed to. Mike Furtak and Zoning Consulting/Real Estate Services LLC will not act as a general contractor or project manager.
9. Any changes to the project after the application(s) have been submitted that requires amending the application is subject to a minimum \$100 change fee.

The undersigned parties have read and understand the above terms of this disclosure and agree to abide by all terms.

Signature 

Date 7-15-22

Print Name: Cory Holschaw

Signature 

Date 7/19/22

Print Name: Leah Holschaw



Description	Updated: 2/8/2022
Tax ID:	38717
PIN:	04-024-2-47-08-17-4 03-000-12000
Legacy PIN:	
Map ID:	
Municipality:	(024) TOWN OF IRON RIVER
STR:	S17 T47N R08W
Description:	PAR IN SW SE LYING S OF HWY IN DOC 2021R-592802
Recorded Acres:	0.000
Calculated Acres:	30.550
Lottery Claims:	0
First Dollar:	No
Zoning:	(AG-1) Agricultural-1
ESN:	118


Tax Districts	Updated: 2/8/2022
1	STATE
04	COUNTY
024	TOWN OF IRON RIVER
163297	SCHL-MAPLE
001700	TECHNICAL COLLEGE

Recorded Documents	Updated: 3/15/2006
WARRANTY DEED	
Date Recorded: 12/28/2021	2021R-592802
WARRANTY DEED	
Date Recorded: 11/16/2018	2018R-575416
WARRANTY DEED	
Date Recorded: 1/8/2016	2016R-561916 1154-757
TRUSTEES DEED	
Date Recorded: 2/15/2011	2011R-537283 1057-950
CONVERSION	
Date Recorded:	464709 695-396;797-738

Ownership	Updated: 2/8/2022
CORY M & LEAH M HOLSCRAW	IRON RIVER WI

Billing Address:	Mailing Address:
CORY M & LEAH M HOLSCRAW PO BOX 622 IRON RIVER WI 54847	CORY M & LEAH M HOLSCRAW PO BOX 622 IRON RIVER WI 54847

Site Address	* indicates Private Road
N/A	



Property Assessment

Updated: N/A

2022 Assessment Detail

Code	Acres	Land	Imp.
N/A			

2-Year Comparison

	2021	2022	Change
Land:	0	0	0.0%
Improved:	0	0	0.0%
Total:	0	0	0.0%

Property History	
Parent Properties	Tax ID
04-024-2-47-08-17-4 03-000-10000	19436

230 ROW  
270 Co Hwy Hint  
145 HWM  
2'eaves

HISTORY	Expand All History	White=Current Parcels	Pink=Retired Parcels
Tax ID: 19436	PIN: 04-024-2-47-08-17-4 03-000-10000	Leg. Pin: 024104207000	
38717	This Parcel	Parents	Children

\$49,000 - 36'x36'  
slab  
Height 18'  
storage loft



Town, City, Village, State or Federal  
Permits May Also Be Required

LAND USE – **X (Shoreland/Wetland)**  
SANITARY –  
SIGN –  
SPECIAL –  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY

## PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **22-0208** Issued To: **Cory & Leah Holsclaw**

Location: **SW** ¼ of **SE** ¼ Section **17** Township **47** N. Range **8** W. Town of **Iron River**

Gov't Lot	Lot	Block	Subdivision	CSM#
-----------	-----	-------	-------------	------

**Residential Structure in A-1 zoning district**  
For: **Accessory: [ 1- Story ]; Garage (36' x 36') = 1296 sq. ft. ] Height of 17'**

**(Disclaimer):** Any future expansions or development would require additional permitting.

**Condition(s): To meet all setbacks including eaves and overhangs. Not for human habitation. For personal storage only. Town/State/DNR permits may be required.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

**McKenzie Slack, AZA**

Authorized Issuing Official

**August 23, 2022**

Date



SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:  
Bayfield County  
Planning and Zoning Depart.  
PO Box 58  
Washburn, WI 54891  
(715) 373-6138

APPLICATION FOR PERMIT  
BAYFIELD COUNTY, WISCONSIN

RECEIVED  
Date Stamp (Received)

JUN 21 2022

Bayfield Co.  
Planning and Zoning Agency

Permit #:	22-0209
Date:	
Amount Paid:	\$1200 7-18-22 Res FIG
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.  
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input checked="" type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: JUDY JOHNSON	Mailing Address: 7830 FRANKLIN ST.	City/State/Zip: IRON RIVER WI 54847	Telephone:
Address of Property: 7830 FRANKLIN ST.	City/State/Zip: IRON RIVER WI 54847	Cell Phone:	
Contractor: DYKSTRA CONSTRUCTION INC.	Contractor Phone: 715-682-9599	Plumber: GREG BROWN	Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s)) TIM DYKSTRA	Agent Phone: 715-682-9599	Agent Mailing Address (include City/State/Zip): 50181 ST. HWY 13, ASHLAND WI 54806	Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
PROJECT LOCATION 1/4, 1/4	Legal Description: (Use Tax Statement) Gov't Lot Lot(s) CSM Vol & Page CSM Doc # Lot(s) No. Block(s) No. Subdivision:	Tax ID# 20540 Recorded Document: (Showing Ownership)	
Section 07, Township 47 N, Range 08 W		Town of: IRON RIVER	Lot Size 17,424 sq' Acreage 0.4

<input type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Are Wetlands Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Non-Shoreland	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		

Value at Time of Completion * include donated time & material	Project	# of Stories	Foundation	Total # of bedrooms in structure	What Type of Sewer/Sanitary System Is on the property?	Type of Water on property
\$400,000.00	<input checked="" type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> Municipal/City	<input checked="" type="checkbox"/> City
	<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary Specify Type: _____	<input type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/> _____
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/> _____
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> Use	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> _____
	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> _____	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> _____	

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Proposed Construction:	Length: 57	Width: 30	Height: 12 1/8

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	( X )	
	<input checked="" type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	( 57 X 30 )	1450
		with Loft	( X )	
		with a Porch	( 10 X 10 )	100
		with (2nd) Porch	( X )	
		with a Deck	( X )	
<input type="checkbox"/> Commercial Use		with (2nd) Deck	( X )	
		with Attached Garage	( 24 X 24 )	576
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ ( <input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	( X )	
	<input type="checkbox"/>	Mobile Home (manufactured date) _____	( X )	
	<input type="checkbox"/>	Addition/Alteration (specify) _____	( X )	
	<input type="checkbox"/>	Accessory Building (specify) _____	( X )	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (specify) _____	( X )	
	<input type="checkbox"/>	Special Use: (explain) _____	( X )	
	<input type="checkbox"/>	Conditional Use: (explain) _____	( X )	
	<input type="checkbox"/>	Other: (explain) _____	( X )	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): JUDY JOHNSON  
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 6/8/22

Authorized Agent: [Signature]  
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date 6/8/22

Address to send permit 50181 STATE HWY 13, ASHLAND WI 54806

Attach  
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed



In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

Fill Out in Ink – **NO PENCIL**

- (1) Show Location of:

(2) Show / Indicate:

(3) Show Location of (\*):

(4) Show:

(5) Show:

(6) Show any (\*):

(7) Show any (\*):
- Proposed Construction

North (N) on Plot Plan

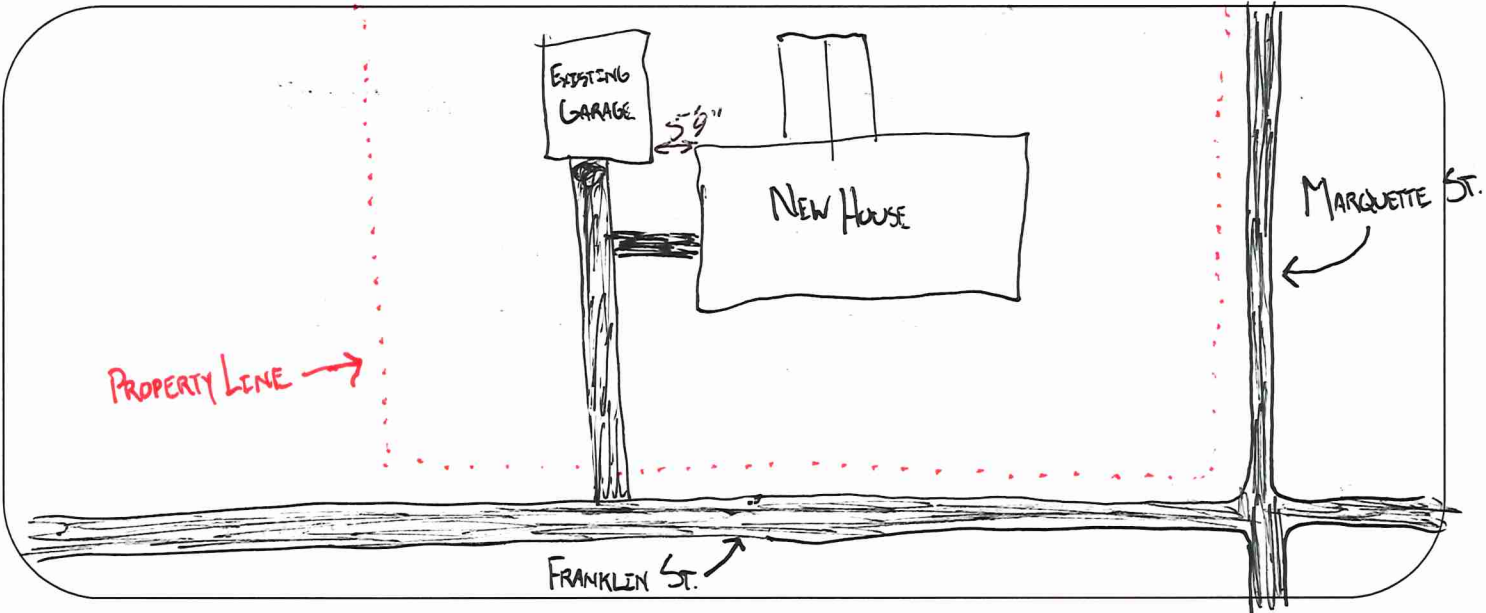
(\*) Driveway and (\*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy, (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

(\*) Wetlands; or (\*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

- (8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	55' East / 75' South	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	50' Feet	Setback from Wetland	Feet
Setback from the South Lot Line	30' Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the West Lot Line	60' Feet	Elevation of Floodplain	Feet
Setback from the East Lot Line	10' Feet		
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

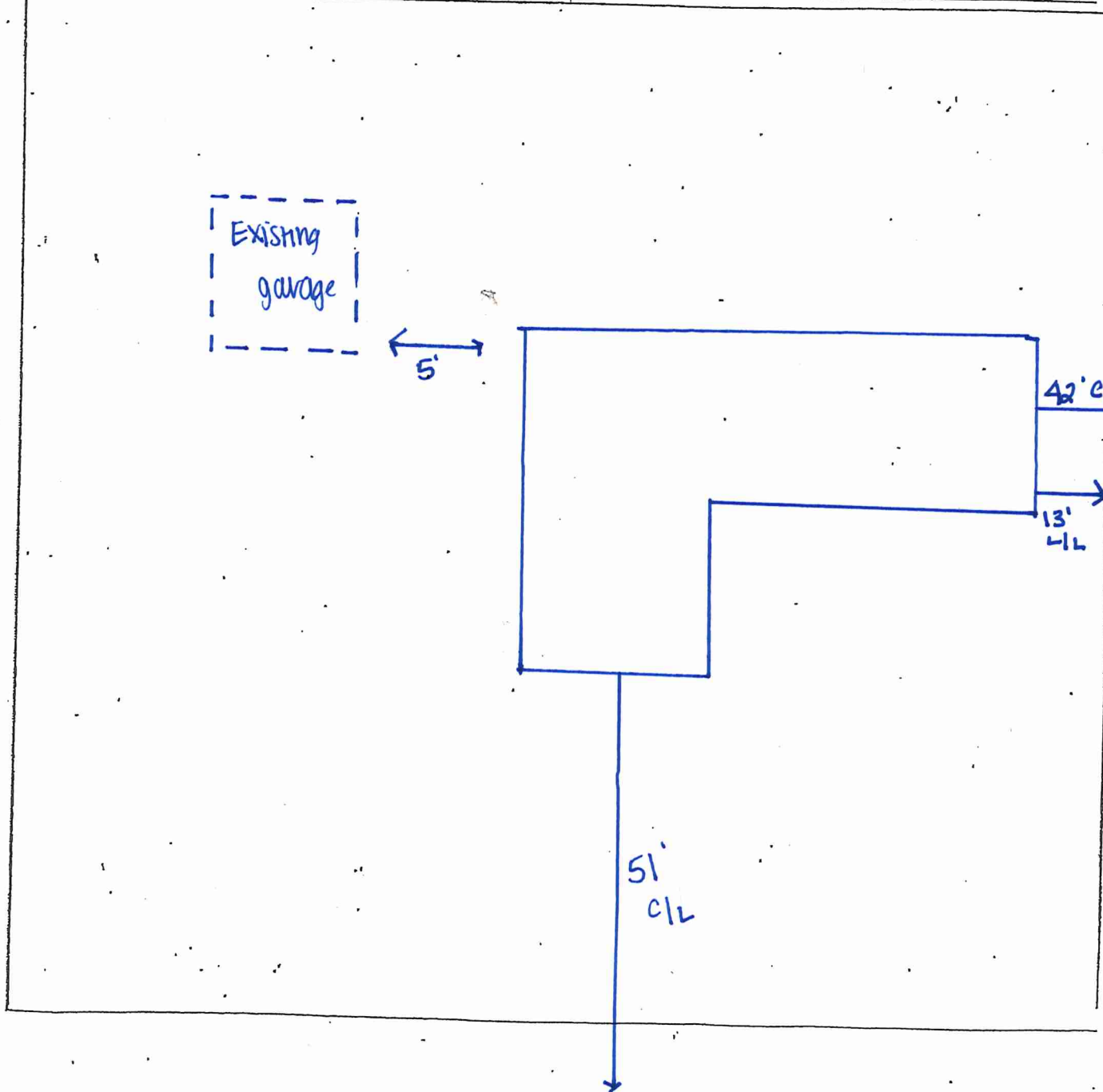
**NOTICE:** All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.  
For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.  
The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

<b>Issuance Information (County Use Only)</b>		Sanitary Number: _____		# of bedrooms: _____		Sanitary Date: _____	
Permit Denied (Date): _____		Reason for Denial: _____					
Permit #:		Permit Date: _____					
Is Parcel a Sub-Standard Lot		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record)		<input checked="" type="checkbox"/> No		Mitigation Required	
Is Parcel in Common Ownership		<input checked="" type="checkbox"/> Yes (Fused/Contiguous Lot(s))		<input type="checkbox"/> No		Mitigation Attached	
Is Structure Non-Conforming		<input type="checkbox"/> Yes		<input type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Granted by Variance (B.O.A.)		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Previously Granted by Variance (B.O.A.)		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Case #:				Case #:			
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Were Property Lines Represented by Owner		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Inspection Record:		Proposed Building Site Staked. Meets unincorporated.				Zoning District ( R4 )	
Date of Inspection: 8/12/2022		Inspected by: ms				Lakes Classification ( - )	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (If No they need to be attached.)		To meet all setbacks including eaves and overhangs. To be constructed per plan. Town/State/DNR permits may be required.					
Signature of Inspector: [Signature]						Date of Approval: 8/15/2022	
Hold For Sanitary: <input type="checkbox"/>		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>	

# Field Investigation

Date: <u>8/12/2022</u>	Arrive: _____	Depart: _____
Landowner: <u>Judy A Johnson</u>	Photos taken: _____	Yes _____ No _____
Project Location: <u>7030 Franklin St.</u>	Persons Present: _____	
Waterway: _____	Purpose of visit:	
PIN# _____ *Attach Real Estate Inquiry*	<input checked="" type="checkbox"/> ZP Onsite	_____ SAP
	_____ Sanitary	_____ Wetland Delineation
	_____ Floodplain	_____ OHWM
	_____ Boathouse	_____ Complaint
Paid \$ _____ Receipt # _____	_____ Averaging	_____ Walkout
	_____ Other: _____	







## Bayfield County, WI



7/19/2022, 8:33:42 AM

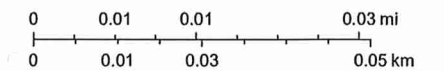
 Approximate Parcel Boundary

Road Type

 Town

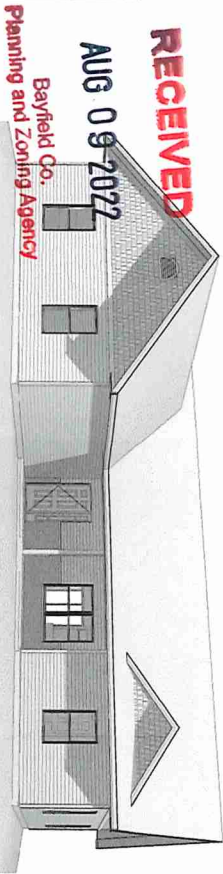
 Building Footprint 2015 Building

1:724



Bayfield County Land Records Department





**RECEIVED**  
**AUG 09 2022**  
Bayfield Co.  
Planning and Zoning Agency

FRONT-RIGHT VIEW

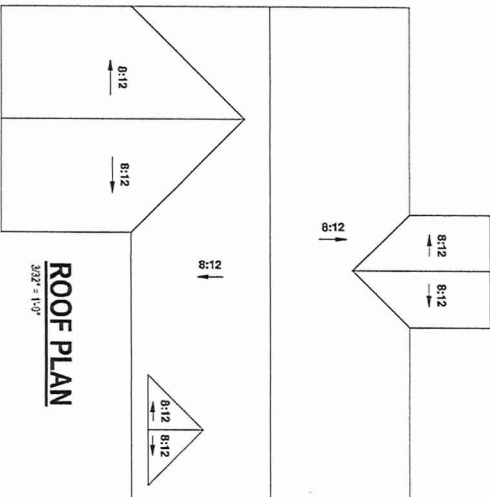
**CUSTOMER APPROVAL**

WE APPROVE THIS PLAN AS SHOWN, AND UNDERSTAND THAT NO STRUCTURAL CHANGES WILL BE MADE ONCE APPROVED.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

CHECK BELOW IF APPLICABLE:  
CERTIFIED SITE AND SECTORS ARE SUBMITTED FOR PERMITTING PURPOSES PRIOR TO SHIPMENT OF HOME.

PLEASE SIGN  
AND RETURN  
THIS COPY TO  
AMWOOD



ROOF PLAN

Amwood - VENT CALCULATIONS						
Name	Area	Minimum total Venting (ft²)	Upper Venting Required (ft²)	Ridge/Vent (LN ft)	Required Ridge Poles (EA)	Required Soffit/Vent (ft²)
1ST FLOOR	1804 ft²	6.01	3.01	39	9	3.01
GARAGE	693 ft²	2.28	1.14	15	3	1.14

Amwood - Available Ridgevent		
Description	Length	
1ST FLOOR	81' - 4 23/32"	
GARAGE	25' - 0"	

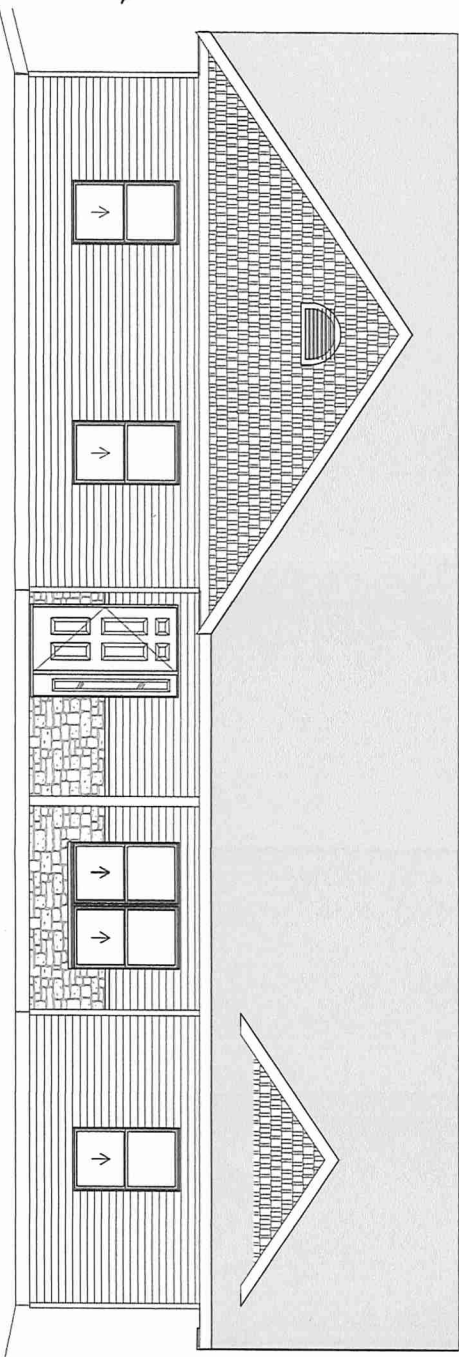
PITCH - OVERHANG - HEEL

8/12 - 24' - 11' @ GARAGE  
8/12 - 24' - 1-5 3/8' @ HOUSE

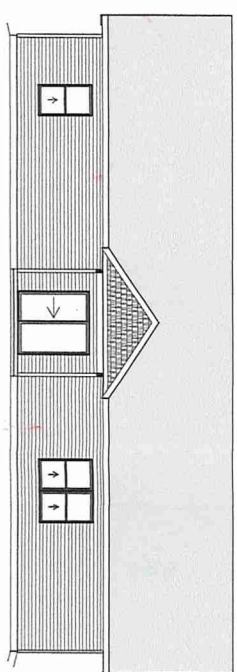
60# ROOF LOADING

18" RAKES

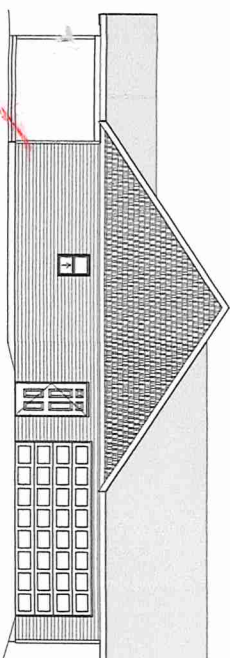
Total Height 12' 1 1/8"



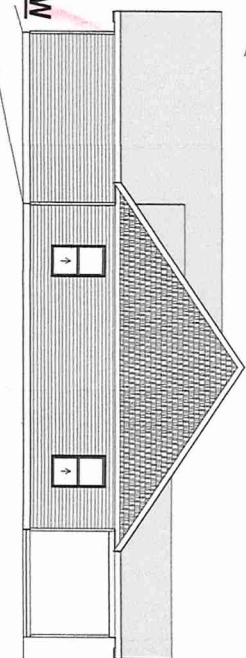
FRONT VIEW



REAR VIEW



LEFT VIEW



RIGHT VIEW

- GENERAL NOTATIONS:**
- Although every effort has been made in preparing these plans, and checking them for accuracy, the contractor must check all dimensions and details, and must be responsible for the same.
  - This print and/or set is the property of Amwood Homes, Inc., and use of this print is prohibited without the written consent of Amwood Homes, Inc.
  - Amwood Homes, Inc. and/or its dealer shall have construction lien rights for use of their blueprints, drawings, plans and/or specifications.

**Amwood**  
CUSTOM HOMES  
"Your Best Investment"

2017 N. Harmony Town Hall Road  
Janesville, WI 53546  
608-756-2989 fax: 608-756-3443  
www.amwoodhomes.com

BASE PLAN: ASH-2105			
TITLE: DYKSTRA CONSTRUCTION INC. - JOHNSON			
BY	CODE	DATE	
MT	WP	04/12/22	
MT	ROL	04/14/22	
WAH	WPC03.4.67	05/31/22	
WAH	WPC01.69	06/14/22	
WAH	CPC01.0	08/20/22	
WAH	CPC01.1	07/06/22	
WAH	CPC01.43	07/13/22	

Elevations	
A-3.00	

JOB NO. ASH-2201  
© 2019 AMWOOD, INC.  
7/13/2022 9:58:39 AM





ALL EXTERIOR & INTERIOR  
WALLS TO HAVE P.T.  
BOTTOM PLATES

**FLOOR PLAN NOTES**  
(1) FLOOR SQUARE FOOTAGE IS CALCULATED TO SHEATHING FACE  
(2) ALL DIMENSIONS ARE TO STUD FACE UNLESS NOTED  
(3) WALL INSULATION BY OTHERS - AMWOOD TO INSULATE CORNERS  
(4) LOAD BEARING FLOOR AND WINDOW HEADERS TO BE (2) 2X10 #2 &  
BTR SFF UNLESS NOTED

**CUSTOMER APPROVAL**

WE APPROVE THIS PLAN AS SHOWN AND  
UNDERSTAND THAT NO STRUCTURAL CHANGES  
WILL BE MADE ONCE APPROVED.

SKETCHED: \_\_\_\_\_ DATE: \_\_\_\_\_

CHECK BEYOND APPLICATION  
CERTIFIED SIGNED AND SEALED TRUSS DRAWINGS FOR  
THE STATE OF \_\_\_\_\_ WILL BE REQUIRED FOR  
PERMITTING PURPOSES PRIOR TO SHIPMENT OF HOME.

PLEASE SIGN  
AND RETURN  
THIS COPY TO  
AMWOOD

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Janesville, WI 53546  
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www.amwoodhomes.com

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BASE PLAN: ASH-2105  
TITLE: DYNASTRA  
CONSTRUCTION INC. -  
JOHNSON

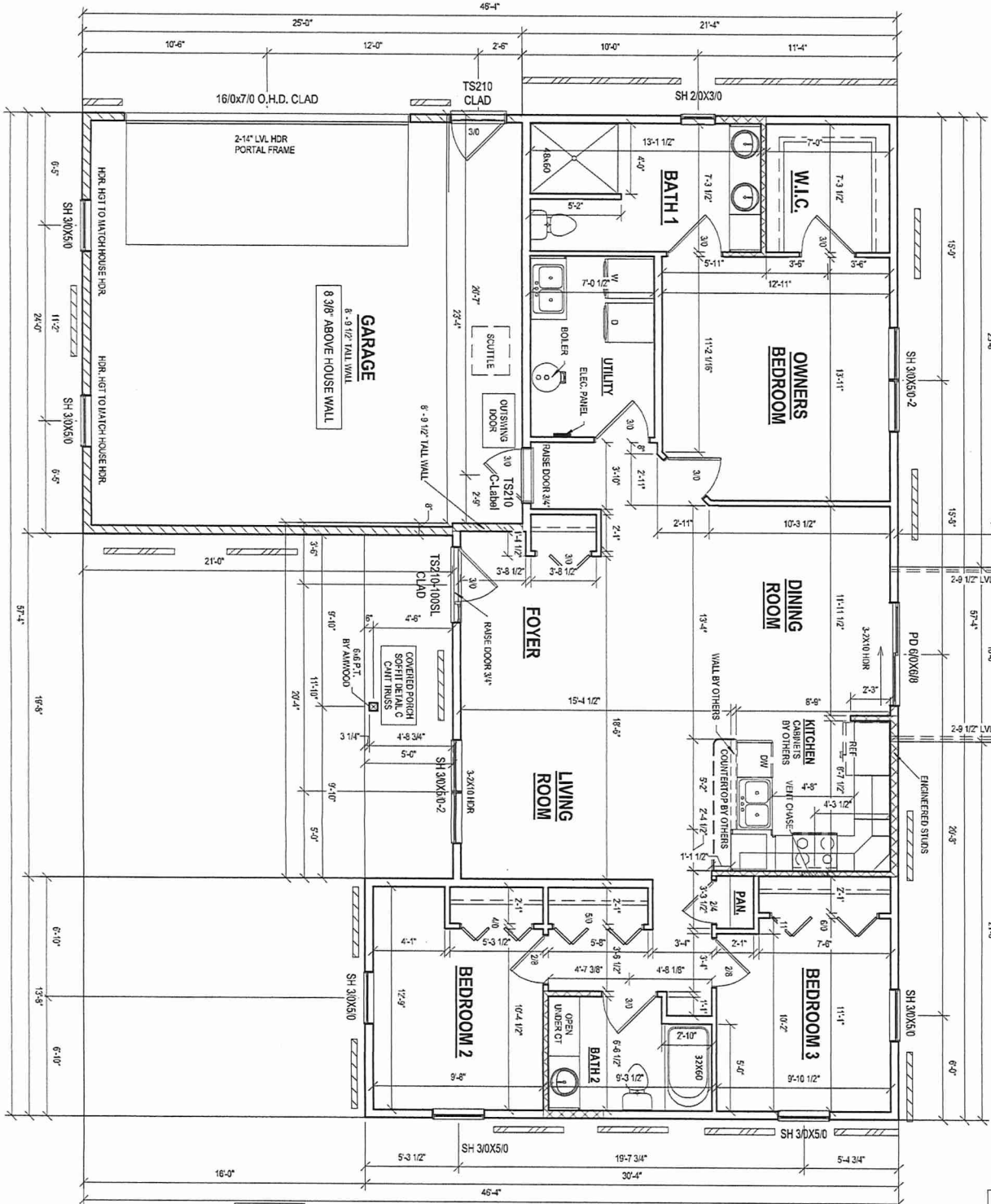
**UDC WIND BRACING**

CONTINUOUSLY BRACED  
6" O.C. @ PERIMETER, 12" O.C. IN FIELD  
OSB BRACED PANEL  
6" O.C. @ PERIMETER, 12" O.C. IN FIELD

BY	CODE	DATE
MT	WP	04/12/22
MT	ROL	04/14/22
WAH	WPC01.A67	05/31/22
WAH	WPC01.B9	06/14/22
WAH	CRAC010	08/20/22
WAH	CRF011	07/06/22
WAH	CRF012A13	07/13/22

1st Floor Plan  
A-2.10

**1ST FLOOR PLAN**  
1/8" = 1'-0"  
1ST FLOOR 1435 SF







CUSTOMER APPROVAL

WE APPROVE THIS PLAN AS SHOWN, AND  
UNDERSTAND THAT NO SUBSTANTIAL CHANGES  
WILL BE MADE ONCE APPROVED.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

CUSTOMER SIGNATURE

CHECK BELOW IF APPLICABLE:

CERTIFIED SIGNED AND SEALED TRUSS DRAWINGS FOR  
THE STATE OF \_\_\_\_\_ WILL BE REQUIRED FOR  
PERMITTING PURPOSES PRIOR TO SHIPMENT OF HOME.

CUSTOMER APPROVAL

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SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

CUSTOMER SIGNATURE

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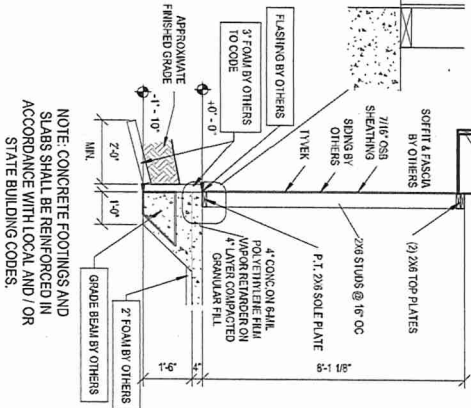
IN SOME AREAS BUILDING CODES  
REQUIRE 16"x16" PILASTERS IN WALLS  
LONGER THAN 20'-0", SPACED @ 20'-0"

FOUNDATION NOTES

- (1) BASEMENT FOUNDATIONS OTHER THAN NOTED, TO BE SIZED AND  
LOCATED BY RULE BOOK
- (2) CONCRETE FOOTINGS AND SLABS SHALL BE REINFORCED IN  
ACCORDANCE WITH LOCAL AND/OR STATE BUILDING CODES
- (3) REGARDLESS OF DETAILS, BOTTOM OF FOOTINGS SHALL BE  
PLACED ON FIRM UNDISTURBED SOIL

PRE-ENGINEERED WOOD TRUSSES

SHINGLES & FELT BY OTHERS OVER  
1/2" OSB SHEATHING BY AMWOOD

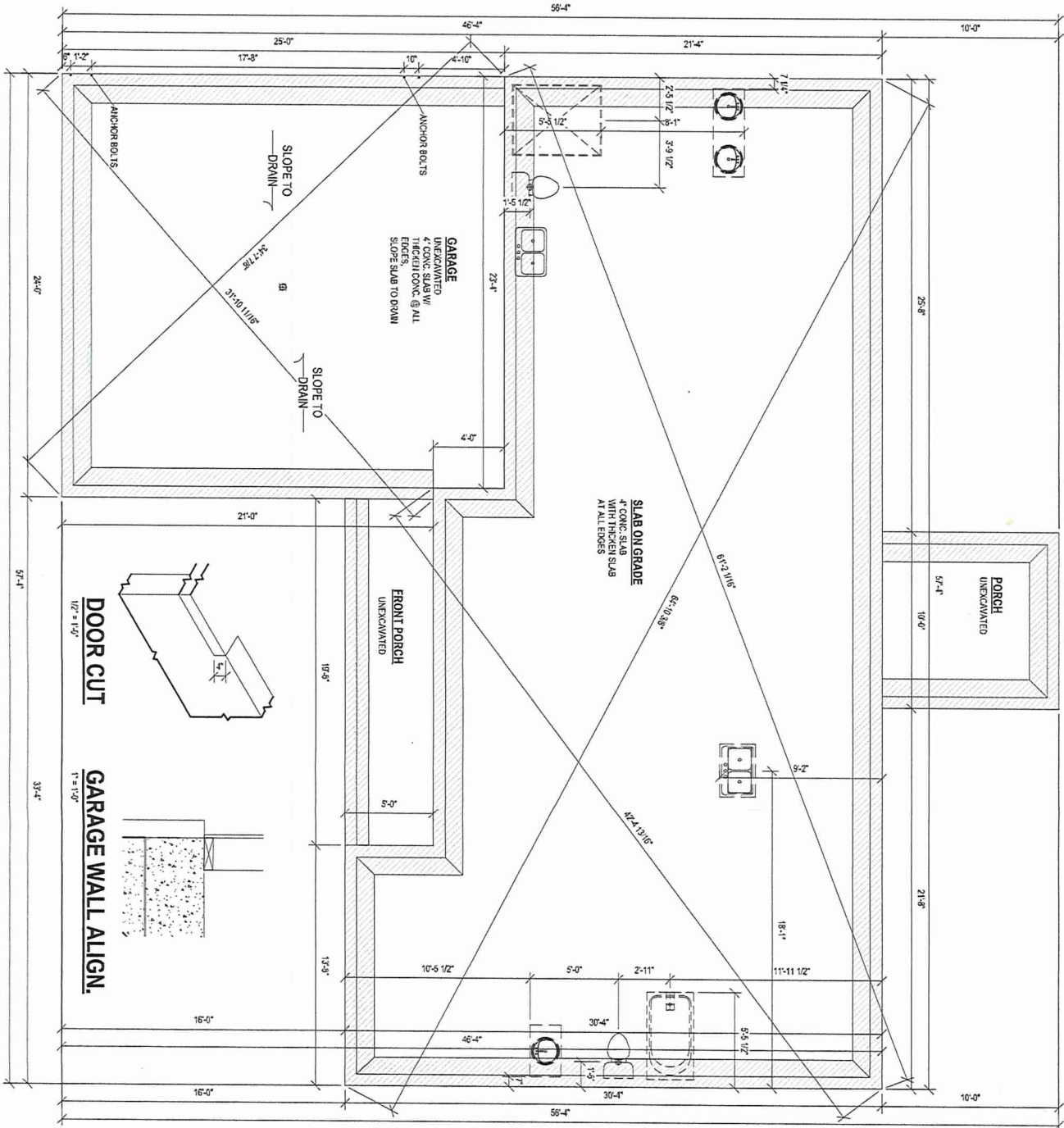


NOTE: CONCRETE FOOTINGS AND  
SLABS SHALL BE REINFORCED IN  
ACCORDANCE WITH LOCAL AND / OR  
STATE BUILDING CODES.

NOTE: REGARDLESS OF DETAILS,  
BOTTOM OF FOOTINGS SHALL BE  
PLACED ON FIRM UNDISTURBED SOIL.

FOUNDATION PLAN

1/4" = 1'-0"



TYPICAL WALL SECTION

3/8" = 1'-0"

BASE PLAN: ASH-2105  
TITLE: DYKSTRA  
CONSTRUCTION INC. -  
JOHNSON

BY	CODE	DATE
MT	WP	04/12/22
MT	ROL	04/14/22
WAH	WPC03A.67	05/31/22
WAH	WPC03B	06/14/22
WAH	CR6C010	06/20/22
WAH	CR6C011	07/06/22
WAH	CR6C013	07/13/22

Foundation Plan  
A-1.00

JOB NO. ASH-2201

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GENERAL NOTATIONS:

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- Amwood Homes, Inc. and/or its dealer shall have construction lien rights for use of their blueprints, drawings, plans and/or specifications.





# DYKSTRA CONSTRUCTION, INC

50181 State Hwy 13  
ASHLAND, WI 54806

715-682-9599

715-682-8410Fax


[info@dykstraconstructininc.com](mailto:info@dykstraconstructininc.com)

May 26, 2022

I, Judy Johnson, give Tim Dykstra, Dykstra Construction, Inc., the authority to sign any documents for permits on our behalf..


  
\_\_\_\_\_  
Judy Johnson

5-26-22  
Date

 **Description**


Updated: 5/24/2021

<b>Tax ID:</b>	20540
<b>PIN:</b>	04-024-2-47-08-07-4 00-247-19000
Legacy PIN:	024114707000
Map ID:	
Municipality:	(024) TOWN OF IRON RIVER
STR:	S07 T47N R08W
Description:	PETTINGILLS FIRST ADDITION LOT 14-18 BLOCK 3 IN DOC 2021R-588575 1032 (JUDY A JOHNSON SURVIVORS REV TRUST 8/27/2020)
Recorded Acres:	0.401
Calculated Acres:	0.397
Lottery Claims:	0
First Dollar:	Yes
Zoning:	(R-4) Residential-4
ESN:	118







 **Tax Districts**

Updated: 3/15/2006

1	STATE
04	COUNTY
024	TOWN OF IRON RIVER
163297	SCHL-MAPLE
001700	TECHNICAL COLLEGE
047030	IRON RIVER SANITARY #1

 **Recorded Documents**

Updated: 3/15/2006

 <b>WARRANTY DEED</b>	
Date Recorded: 5/7/2021	2021R-588575
 <b>TERMINATION OF DECEDENT'S INTEREST</b>	
Date Recorded: 9/25/2017	2017rR-570095
 <b>WARRANTY DEED</b>	
Date Recorded: 9/25/2017	2017R-570096
 <b>TERMINATION OF DECEDENT'S INTEREST</b>	
Date Recorded: 9/25/2017	2017R-570094
 <b>CONVERSION</b>	
Date Recorded:	496710 834-791+;837-845;909-683
 <b>QUIT CLAIM DEED</b>	
Date Recorded: 12/29/2004	2004R-496710 909683

 **Ownership**

Updated: 5/24/2021


<b>JUDY A JOHNSON SURVIVORS REV TRUST</b>	MELLEN WI
---	-----------

<b>Billing Address:</b>	<b>Mailing Address:</b>
<b>JUDY A JOHNSON SURVIVORS REV TRUST</b>	<b>JUDY A JOHNSON SURVIVORS REV TRUST</b>
830 WHITE AVE	830 WHITE AVE
MELLEN WI 54546	MELLEN WI 54546

 **Site Address**

\* indicates Private Road

7830 FRANKLIN ST	IRON RIVER 54847
------------------	------------------

 **Property Assessment**

Updated: 8/20/2018

2022 Assessment Detail			
Code	Acres	Land	Imp.
G1-RESIDENTIAL	0.401	12,700	7,800
2-Year Comparison			
Land:	2021	2022	Change
	12,700	12,700	0.0%
Improved:	7,800	7,800	0.0%
Total:	20,500	20,500	0.0%

 **Property History**

N/A



Town, City, Village, State or Federal  
Permits May Also Be Required

LAND USE – **X**  
SANITARY –  
SIGN –  
SPECIAL –  
CONDITIONAL –  
BOA –

# BAYFIELD COUNTY

# PERMIT

WEATHERIZE AND POST THIS PERMIT  
ON THE PREMISES DURING CONSTRUCTION

No. **22-0209** Issued To: **Judy A Johnson Survivors Rev Trust**

Location: Section **7** Township **47** N. Range **8** W. Town of **Iron River**

Lot **14-18** Block **3** Subdivision **Pettingills First Addition**

**Residential Structure in R-4 zoning district**

For: **Residential: [ 1-Story], Residence (57' x 30') = 1450 sq. ft.; Porch (10' x 10'); Attached Garage (24' x 24')**

**Condition(s):** **A Uniform Dwelling Code (UDC) Permit from the locally contracted UDC Inspection Agency must be obtained prior to the start of construction. Meet all setbacks including eaves and overhangs. To be constructed per plan. Town/State/DNR permits may be required.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

**McKenzie Slack, AZA**

Authorized Issuing Official

**August 23, 2022**

Date